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APPLICANT (use as many sheets as necessary)				Filing Date	June 20, 2003	
				First Name Inventor	David P. Adams	
				Group Art Unit	Unassigned	
				Examiner Name	Unknown	
Sheet	i	of	2	Attorney Docket Number	010398-9060-02	

U.S. PATENT DOCUMENTS									
tanuner nitials	U.S. Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document						
300	4,421,264	Arter, et. al.	12/1983						
30	1,810, 528	Peterson	6/1931						
SW	1,996,222	Vogel	4/1935						
370	2,987,729	Taynton	6/1961						
57W	3,504,837	Cairatti	4/1970						
So	3,642,187	Barland	2/1972						
972	4,318,555	Adamski, et al.	3/1982						
3 0	4,583,276	Olesen	4/1986						
374	4,693,407	Buck, et al.	9/1987						
50	5,007,483	McGuire	4/1991						
5W	5,516,025	Friksson	5/1996						
Grus .	6,076,720	Deng	6/2000						
									

miner	/	1	<u> </u>	Date	01,104
nature			ノノヘ	Considered	0/4/07
4 9 CW TMM					*

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